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Complete if Known Substitute for form 1449/PTO **Application Number** Filing Date 09/11/2003 INFORMATION DISCLOSURE First Named Inventor M. NARUSE STATEMENT BY APPLICANT Art Unit (Use as many sheets as necessary) **Examiner Name** Attorney Docket Number 70005 CCD Sheet

				U. S. PATENT	DOCUMENTS			
Examiner Initials*	Cite No.1	Document Number-Kind Co		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear		
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L'		US- 6 400	492	06-04-02	Morite et al.			
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BH		JP 61-095978	05-14-86	Ricoh G. Ha.		
		JF 2001-138637	05-22-01	Kuraray Go. Ut		
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